

UTILITY PATENT APPLICATION TRANSMITTAL

DUPLICATE

Address to:	Attorney Docket No.	LEES3020/EM
Box PATENT APPLICATION	First Named Inventor (or identifier)	Szetsen Steven LEE
Commissioner of Patents	Total Pages	51
P.O. Box 1450		
Alexandria, VA 22313-1450		

Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled: Method For Detecting The End Point By Using Matrix

03916 US PTO
10/657217
09/09/03

1. Submitted herewith are the following:
- 16 pages of specification, including claims and Abstract.
 2 sheets of FORMAL drawings (Figs. 1 and 2).
 14 claims.
 1 Oath/Declaration signed by each inventor.
 1 Application Data Sheet.
 1 Assignment of the invention to Winbond Electronics Corp., Hsinchu, Taiwan, R.O.C.,
 Cover Sheet, and payment of the \$40 recordal fee.
 1 certified copy of Taiwan application no. 091120919. Priority is claimed.
 1 check in the amount of \$790 (\$750- Filing Fee; \$40- Assignment Recordation Fee).
2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.
3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.
4. Insert before the first sentence of the specification: -- This application claims the benefit of provisional application number _____ filed _____. --
5. Insert before the first sentence of the specification: -- This application is a Continuation-in-part of nonprovisional application number _____ filed _____. --
6. Other: _____

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.

THE FILING FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	\$750.00	
Total Claims:	14	- 20 =	0	X \$18 =	\$0.00	
Independent Claims:	2	- 3 =	0	X \$84 =	\$0.00	
Correspondence Address: BACON & THOMAS, PLLC 625 Slaters Lane, 4 th Floor Alexandria, VA 22314-1176				23364 CUSTOMER NUMBER	Multiple Dependent Claim (add \$280.00):	\$0.00
					Subtotal:	\$750.00
					50% Reduction if Small Entity Status:	\$0.00
Phone: 703-683-0500		Fax: 703-683-1080			Total:	\$750.00
Date:	Name:		Signature:		Reg. No.	
September 9, 2003	Eugene Mar				25,893	